

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 143 OF 361

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Cherna Moskowitz**

Mailing Address **4744 N Bay Rd**

City **Miami Beach** State **FL** Zip Code **33140**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Physician**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt

M M / D D / Y Y Y Y  
**03 08 2013**

Transaction ID : **SA11AI-CN32893**

Amount of Each Receipt this Period

**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. W Quay Mull II**

Mailing Address **2839 Oglebay Dr**

City **Wheeling** State **WV** Zip Code **26003**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Mull Machine Co.** Occupation **President**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **500**

Date of Receipt

M M / D D / Y Y Y Y  
**03 29 2013**

Transaction ID : **SA11AI-CN34330**

Amount of Each Receipt this Period

**500**

**C.** Full Name (Last, First, Middle Initial)  
**Tommy H. Mullins**

Mailing Address **1521 Spars Creek Rd.**

City **Danville** State **WV** Zip Code **25053-8020**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Boone Mem. Hospital** Occupation **Administration**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **250**

Date of Receipt

M M / D D / Y Y Y Y  
**02 20 2013**

Transaction ID : **SA11AI-CN32648**

Amount of Each Receipt this Period

**250**

**SUBTOTAL** of Receipts This Page (optional).....

**1750.00**

**TOTAL** This Period (last page this line number only).....